

ISSUE CLASSIFICATION	
Class	Subclass

PATENT NUMBER

U.S. **UTILITY** Patent Application

O.I.P.E.

PATENT DATE

SCANNED

**Q. A**

APPLICATION NO. 09/603409	CONT/PRIOR	CLASS 623	SUBCLASS 1.11	ART UNIT 3738 3731	EXAMINER Ho
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### Intraluminal stents

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## ISSUING CLASSIFICATION

ORIGINAL					CROSS REFERENCE(S)							
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)						
INTERNATIONAL CLASSIFICATION												

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	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____  _____  _____	_____ (Assistant Examiner) (Date)		<b>NOTICE OF ALLOWANCE MAILED</b>	
	_____ (Primary Examiner) (Date)		<b>ISSUE FEE</b>	
			Amount Due	Date Paid
--- The terminal ____months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)		<b>ISSUE BATCH NUMBER</b>	
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